

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORKCHARLES PRATTRECEIVED  
SDNY PRO SE OFFICE

2016 OCT 24 AM 9:37

**16CV 8278**

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

City of New York  
New York City Police Dept.  
Housing AuthorityPolice Officer ERNESTO CRISOSTOMO  
Badge No 28489**COMPLAINT**

under the

Civil Rights Act, 42 U.S.C. § 1983  
(Prisoner Complaint)Jury Trial:  Yes  No  
(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

**I. Parties in this complaint:**

A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name CHARLES PRATT  
 ID # 349-16-00696  
 Current Institution Brooklyn Detention Complex  
 Address 275 ATLANTIC AVE.  
Brooklyn, N.Y. 11201

B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name CITY OF NEW YORK Shield # \_\_\_\_\_  
 Where Currently Employed New York City Law Dept.  
 Address 100 church street  
NEW YORK, N.Y. 10007

Defendant No. 2

Name N.Y.C. Police Dept. Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address 1 POLICE PLAZA  
NEW YORK, N.Y. 10007

Defendant No. 3

Name ERNESTO CRISOSTOMO Shield # 28489  
 Where Currently Employed New York City Police Dept. Housing  
 Bureau (Area 6) 221 E-123 St.  
NEW YORK, N.Y. 10029

Defendant No. 4

Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_

Defendant No. 5

Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_

## II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?

N.Y.A.

B. Where in the institution did the events giving rise to your claim(s) occur?

N.Y.A.

C. What date and approximate time did the events giving rise to your claim(s) occur?

JANUARY 15, 2016 APPROX 11:30 PM.

D. Facts: \_\_\_\_\_

What happened to you?

Please

Who did what?

SEE

Was anyone else involved?

ATTACHED

STATEMENT

OF

FACT'S

Who else saw what happened?

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

PLEASE SEE  
STATEMENT  
OF  
FACT'S

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes        No ✓

1). THE plaintIFF, CHARLES PRATT WAS FALSELY ARRESTED AND CHARGED ON JANUARY 15, 2016 AT ABOUT APPROXIMATELY 11:30 PM, 60 - EAST 106 STREET, APT 3D IN THE COUNTY AND STATE OF NEW YORK FOR FORCIBLE COMPLAINT WITH THE INTENT TO IMPEDE THE NORMAL BREATHING AND THE CIRCULATION OF THE BLOOD OF ANOTHER PERSON, APPLIED PRESSURE ON THE THROAT AND NECK OF SUCH PERSON, AND THERE BY CAUSED STUPOR, LOSS OF CONSCIOUSNESS FOR ANY PERIOD OF TIME, AND ANY OTHER PHYSICAL INJURY AND IMPAIRMENT ALONG WITH CRIMINAL POSSESSION OF A WEAPON IN THE FOURTH DEGREE PURSUANT TO SUBDIVISION 1,2, 3, OR 5 OF PENAL LAW 265.01

- RAPE IN THE FIRST DEGREE
- CRIMINAL SEXUAL ACT IN THE FIRST DEGREE
- STRANGULATION IN THE SECOND DEGREE
- CRIMINAL POSSESSION OF A WEAPON IN THE FORTH DEGREE

2). I plaintIFF, CHARLES PRATT, HAVE BEEN IN CARCERATED UNLAWFULLY FOR APPROXIMATELY 11 MONTHS AND DUE TO MY INNOCENCE MY CASE WAS DISMISSED IN MANHATTAN CRIMINAL COURT ON DATE OF (JULY 27, 2016), AS A RESULT OF WRONGFUL IMPRISONMENT MY PAROLE STILL KEPT ME IN PRISON. I WAS ALSO ASSAULTED, AND AS A RESULT, MY LIFE IN DANGER AND I WAS PLACED INTO PROTECTIVE CUSTODY BECAUSE OF NUMEROUS THREATS AND FEAR FOR MY LIFE.

- FALSE ARREST
- MALICIOUS PROSECUTION
- UNLAWFUL IMPRISONMENT
- DEFAMATION OF CHARACTER

3). I plaintiff, Charles PRATT is suffering from mental anguish, alienation, degradation, humiliation, embarrassment, stress and anxiety. FALSE ARREST, Malicious prosecution, unlawful imprisonment, Defamation of character, arbitrary and capricious, cruel and usual punishment. And I lost my job, relationship[s] both personal and professional AS WELL AS some family while I am now seeking Civil Ramification in this matter.

4). As a result of the actions herein stated by THE New York City police Department - Housing Authority ; AREA 5, This plaintiff seeks damages in THE AMOUNT OF \$ 37,000 FOR ACTUAL MONETARY LOST AND PUNITIVE damage \$ 30,000,000.

5). Defendants are responsible for plaintiff current mental unhealth, as a result of their rogue behavior and neglect of their duty of law.

6). By reason of the facts and circumstances stated above Defendants willfully neglected their duty of law as per U.S. CONST. AMENDS. 5, 14(1)

D. By reason of the facts and circumstances stated above  
the damages that Defendant(s) has caused Plaintiff is  
priceless.

WHERE, Plaintiff demands judgment against  
Defendant(s) in the sum of \$30,000,000. plus  
interest together with any other relief the  
Court finds to be just and proper.

Dated: Oct 9, 2016

CHARLES PRATT  
CHARLES PRATT #3491600696  
Brooklyn Detention Complex  
275 ATLANTIC AVENUE  
Brooklyn, New York 11201

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

*N/A*

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes \_\_\_\_\_ No \_\_\_\_\_ Do Not Know \_\_\_\_\_

*N/A*

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes \_\_\_\_\_ No \_\_\_\_\_ Do Not Know \_\_\_\_\_

*N/A*

If YES, which claim(s)? \_\_\_\_\_

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes \_\_\_\_\_ No \_\_\_\_\_

*N/A*

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes \_\_\_\_\_ No \_\_\_\_\_

*N/A*

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

*N/A*

1. Which claim(s) in this complaint did you grieve? \_\_\_\_\_

*N/A*

2. What was the result, if any? \_\_\_\_\_

*N/A*

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.

*N/A*

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: \_\_\_\_\_

*N/A*

2. If you did not file a grievance but informed any officials of your claim, state who you informed,

when and how, and their response, if any: \_\_\_\_\_

*[Handwritten signature]*

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. \_\_\_\_\_

*N/A*

**Note:** You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). \_\_\_\_\_

*PLEASe*

*SEE*

*STATEMENT*

*OF*

*FACTS*

VI. Previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes        No       

On  
these  
claims

B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff \_\_\_\_\_

*N/A*

Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

*N/A*

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes \_\_\_\_\_ No \_\_\_\_\_

If NO, give the approximate date of disposition \_\_\_\_\_

*N*

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

*A*

On  
other  
claims

C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes \_\_\_\_\_ No

D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff \_\_\_\_\_

*N/A*

Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

*N/A*

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

*N/A*

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes \_\_\_\_\_ No

If NO, give the approximate date of disposition \_\_\_\_\_

*N/A*

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

*N/A*

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 9 day of oct., 2016

Signature of Plaintiff

Inmate Number

Institution Address

Charles Pratt  
3491600696  
Brooklyn Detention Complex  
275 Atlantic Avenue  
Brooklyn, NY 11201

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 9 day of oct., 2016 I am delivering this complaint to prison authorities to be mailed to the Pro Se Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Charles Pratt

CRIMINAL COURT OF THE CITY OF NEW YORK  
COUNTY OF NEW YORK

THE PEOPLE OF THE STATE OF NEW YORK  
VS

PRATT, CHARLES

Defendant

Address

City NY State NY Zip   

Docket Number: 2016NY004415

121.12 130.35 130.50 265.02  
Arraignment Charges

CERTIFICATE OF DISPOSITION  
NUMBER: 467385

[REDACTED]  
Date of Birth

[REDACTED]  
NYSID Number

01/16/2016  
Date of Arrest/Issue

Summons No:

Case Disposition Information:

Date	Court Action	Judge	Part
<u>07/27/2016</u>	<u>DISMISSED - MOTION OF DA</u>	<u>DAVIDSON, C</u>	<u>2F</u>

NO FEE CERTIFICATION

- GOVERNMENT AGENCY      - COUNSEL ASSIGNED

- NO RECORD OF ATTORNEY READILY AVAILABLE. DEFENDANT STATES COUNSEL WAS ASSIGNED

SOURCE    ACCUSATORY INSTRUMENT    DOCKET BOOK/CRIMS    CRC3030 [CRS963]

I HEREBY CERTIFY THAT THIS IS A TRUE EXCERPT OF THE RECORD ON FILE IN  
THIS COURT.

KELLY, E E Kelly  
COURT OFFICIAL SIGNATURE AND SEAL

10/12/2016  
DATE      FEE: NONE

(CAUTION: THIS DOCUMENT IS NOT OFFICIAL UNLESS EMBOSSED WITH THE COURT  
SEAL OVER THE SIGNATURE OF THE COURT OFFICIAL.)

**SEALED**

pursuant to Section 160.50 of the CPL

CHARLES PLATT # 8441600696

Brooklyn Detention Complex  
275 ATLANTIC AVENUE  
Brooklyn, N.Y. 11201



RECEIVED  
SDNY PRO SE OFFICE  
2016 OCT 24 AM 9:37

TO: United States  
Court House  
500 PEARL ST.  
RM. 200  
New York, N.Y. 10007-1312

USM<sup>P3</sup>  
SDNY

